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APPLICANTS

Jack Zhu, Westford, MA;
 Alok Kishore Bhargava, Burlington, MA;
 Ray Alexander Balogh, North Andover, MA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
**** 07/05/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 4	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 6
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged 000959	Examiner's Signature	Initials		

ADDRESS

000959

TITLE

METHOD FOR RESTORING DIVERSELY ROUTED CIRCUITS

FILING FEE RECEIVED 1938	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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